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UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))	Attorney Docket No.	1672-070CON
	First Inventor or Application Identifier	David G. Worthy
	Title	BIAS COMPENSATING REMOTE AUDIENCE...
	Express Mail Label No.	

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)	5. <input type="checkbox"/> Microfiche Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Specification [Total Pages 30] (preferred arrangement set forth below) - Descriptive title of the invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the invention - Brief Summary of the invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure	6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 5] 4. Oath or Declaration [Total Pages 2] a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 16 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).	ACCOMPANYING APPLICATION PARTS 7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement of Power of Attorney (when there is an assignee) 9. <input type="checkbox"/> English Translation Document (if applicable) 10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 [Copies of IDS Citations] 11. <input checked="" type="checkbox"/> Preliminary Remarks 12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 13. <input checked="" type="checkbox"/> * Small Entity Statement(s) [Statement filed in prior application, Status still proper and desired (PTO/SB/09-12)] 14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 15. <input checked="" type="checkbox"/> Other: Return Receipt Postcard; Check for \$345 for filing fee.

* NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:
☒ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: **09 / 038,267**
 Prior application information: Examiner **V. Srivastava** Group / Art Unit: **2711**
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

☐ Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or ☐ Correspondence address below

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Signature	Lowell W. Gresham	Date	20 April 2000

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.



In the application of: David G. Worthy

Serial No.:

Filed: Herewith

For: *BIAS COMPENSATING REMOTE AUDIENCE SURVEY SYSTEM AND METHOD*

ASSISTANT COMMISSIONER FOR PATENTS
Washington, D.C. 20231

Sir:

The filing fee has been calculated as shown below

	Number Filed			Number Extra
Basic Fee				
Total	9	Minus	20	= 0
Indep	2	Minus	3	= 0
First Presentation of Mult. Dep. Claims				

Small Entity

RATE	Fee
	\$ 345
X 9	\$ -0-
X 39	\$ -0-
X 130	\$ -0-
Total	\$ 345

Other than
a Small
Entity

RATE	Fee
	\$ 690
x 18	\$ -0-
x 78	\$ -0-
x 260	\$ -0-
or Total	\$ -0-

☒ A check in the amount of \$345.00 is enclosed☒ A duplicate copy of this transmittal sheet is enclosed.DATED: 20 April 2000

Respectfully Submitted.

Lowell W. Gresham
Attorney for Applicant(s)
Reg. No. 31,165

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: DAVID G. WORTHY

Serial No.:

Filed:

For: *BIAS COMPENSATING REMOTE AUDIENCE SURVEY SYSTEM AND METHOD*

CERTIFICATE OF MAILING

Assistant Commissioner for Patents
Washington, D.C. 20231

Dear Sir:

I hereby certify that this correspondence, consisting of this Certificate of Mailing; Continuation Application Transmittal Form; Fee Transmittal (in duplicate); Declaration and Power of Attorney (copy of original as filed); Small Entity Statements (copy of originals as filed); Preliminary Remarks; Patent Application; Five (5) sheets of formal drawings and three (3) copies of same; Updated Information Disclosure Statement w/Form PTO-1449; Check in the amount of \$345 for filing fee; and a Postcard are being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

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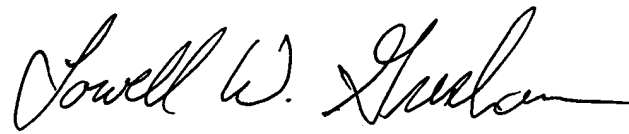
on

20 April 2000

Date

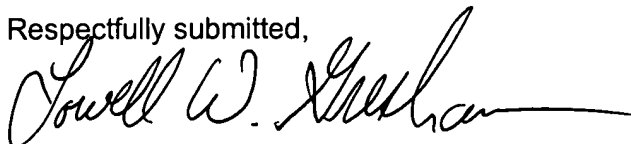
20 April 2000

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